

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------|---------|
| FEE DETERMINATION | <i>CH</i> | 67014 | 4/15/94 |
| O.I.P.E. CLASSIFIER | | | 4/26/94 |
| FORMALITY REVIEW | <i>CH</i> | 71531 | 6-20-00 |
| RESPONSE FORMALITY REVIEW | | 71531 | 8-25-00 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------|----------|
| Final | |
| Original | 10/20/03 |
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If more than 150 claims or 10 actions
staple additional sheet here

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